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INSENSIBILITY PRODUCED BY ETHEREAL INHALATION.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—Will Mr. Morton's ethereal vapor allay the mental vexation and moral suffering which the papers of his medical supporters have inflicted upon innocent parties, your subscribers, who have been unrighteously cajoled into reading advertisements very like empirical, where they least expected to find them? If this most ancient novelty have such assuaging power, the agent who is now among us to dispense the patent nostrum may do some business. Perhaps even the "ten per cent." might be given for restored equanimity. Good Mr. Editor, how could you let us innocent men be so aggrieved? You know that we are almost driven mad by "patentees." Like Pharaoh's frogs they are in every man's kneading trough. Through every newspaper—political, religious, literary or miscellaneous—we are assailed by "patentees." In our down-sitting and our up-rising, in our houses and in the streets, by printed papers, by flaunting signs, by illuminated letters, by frightful hieroglyphics and by oral applications, we are attacked, out-flanked, surrounded by "patentees;" and now, when driven from all other places of literary entertainment, our jaded minds turn to our private and peculiar journals, lo! even there we are charged to our teeth by "patentees." Truth finds no rest for her foot; the Goths are in the capitol; alas! for medicine!

Excuse me, Doctor, if my style is more passionate than precise. This ethereal vapor is in my head, and though, as your recent pages testify, it makes some of your correspondents dull and heavy, steeping their sense in forgetfulness of things once familiarly known, and blinding them to the perception of things obvious to the plainest understanding, it stimulates other minds to a pitch of exaltation a little too high for grave and sententious utterances. But I am somewhat calmer now, and I will endeavor to put my objections to this business in a shape more dialectical than the exordium.

In the first place, I utterly protest against Mr. Morton, or anybody else, "patenting" sulphuric ether—or its *application*. The law of patents is plain and congruous to common sense. A man may patent an *invention*. If he makes anything new, in the shape of a machine, or if he forms a new substance, he may patent it. But he cannot apply a known substance to a new use and "patent" the right to use it in this way. For example—we all can make gun cotton. The process is

known, it is yours and mine—this gun cotton, with all its powers, is ours, and we may do what we can with it. Well, it has never yet been applied to blasting rocks. I apply it—it succeeds—it proves better than gunpowder. I cannot patent it—I have *invented* nothing. I have only applied a known power. But suppose I apply it through a particular machine, which enables me to apply the power to advantage. Why, then I may patent my *machine*. I may claim exclusive right to the *means* I employ to bring out and make effective the powers of the gun cotton. Prof. Morse cannot patent electro-magnetism, nor can he patent its application to the transmission of intelligence; but he can patent his *machine* for so using electricity. Suppose I give calomel in a case for which it never was given before, and succeed. Think you, Dr. Smith, that I could forbid you or anybody else to use the drug for a similar purpose? Certainly not. Well, then, suppose I use ether—is the case different? But I need not pursue the argument. The theory of patents is plain, the law is plain, and the case in question is plain.

2dly, I protest against the whole business, because I verily believe the great discovery to be utterly useless. If it does not succeed better in Boston than in other places nearer to your humble servant, I would not give a farthing for it. In this part of the world it has utterly failed to do what it ought to do, and unfortunately it has done what it ought not to have done. In one instance it produced distressing sensations about the chest, which warned the inhaler to let it alone, and he has a teasing cough placed to the debtor side of the account. In another the patient did not get insensible, but got drunk, and boxed the surgeon-dentist's jaws, as his reward for administering the intoxicating vapor.

But you will say—"the cases! the cases! Dr. Bigelow's cases! Dr. Warren's cases! the Massachusetts Hospital cases! Are they not satisfactory?" No, Dr. Smith, they are not. They savor prodigiously of "mesmeric" incantation. Do you remember one Dr. Collier, whom a number of the Boston faculty sent to us some years ago, armed with professional certificates, all testifying to his "charming" powers? Pardon me, we are a little suspicious of our Boston brethren since that time. They are clever men, very clever, but—some of them—a little credulous. Just look at these cases a little closely. "A boy of 16" inhales. "After eight minutes his head falls back." Of course he was insensible, and the dentist proceeded to extract the tooth. But the boy was too wide awake, and made "some resistance to opening the mouth." But he inhaled more, and then the tooth was got out. "At the moment of extraction the features assumed an expression of pain and the hand was raised." Very natural, but not ethereal. When he came to, however, he said he had suffered no pain—"not the slightest consciousness of pain," "had dreamed of Napoleon." From all which it is proved, that people may have *pain* (evidenced by "expression of the features" and movement of the hand), and not *feel* it.

"A stout boy" inhaled for three minutes—the muscles were relaxed. "During the attempt to *force* open the mouth" (the muscles being much *relaxed*) he became conscious—inhaled more, became uncon-

scious—two teeth were extracted. The patient seemed "somewhat" conscious—but on waking he declared it was "the best fun he ever saw," and begged to have another tooth drawn. He was gratified, but this time there was no fun in it, for "the pain proved to be considerable."

So much for the "stout boy." "A girl of 16" *flinched* and *frowned*; but when awake, said she had been dreaming a pleasant dream.

The next patient, "a healthy, middle-aged woman," manifested no pain at all. And these cases, we are told, are "fair examples of the average results produced by the inhalation of the vapor." It is likely they are, and they convince us that ether has precisely the power it was known to have had at least, as we have evidence at hand to show, twenty-five years ago; when in certain cases it produced a degree of narcotism, at the expense of great bronchial irritation, and even, as was then supposed, fatal pulmonary disease. Heretofore surgeons have declined using this agent, because they were aware that lethargy and fatal coma were conditions divided by a line of separation too indistinct to permit of the production of insensibility with impunity, and because pulmonary irritation is a more serious evil than pain.

The truth is, that what your correspondents are pleased to call, in medical parlance, "producing insensibility," is in fact "making people dead drunk." Everybody knows that when a man is in this curious condition he is very insensible to pain. A poor Irishman in this neighborhood, while in this state of "insensibility," had both legs taken off by a locomotive. He manifested so little "sensibility" that he was not aroused until a surgeon was amputating the shattered stumps, when he cried out, "dont't be cutting me, me flesh is aisy to hale." Can ethereal vapor beat this exploit of whiskey? I trow not. Now, Dr., if we are to induce insensibility by this class of means, I very much prefer whiskey punch to ether, because it is more certain and more permanent in its effects; it is less dangerous, and, lastly, it will be easier to persuade patients to take it. Moreover, I have the same right to patent whiskey punch for this purpose, that Mr. Morton has to patent ether—for I do not know that such an application of the article has been made before.

But admitting that sul. ether is an invention; admitting that it has all the powers ascribed to it, should the medical and dental professions sanction the patenting of it?

It is mortifying to have to ask this question. I thought it had been settled long since, as a fundamental principle in medical ethics. What do we, any of us, know that we have not received? And shall the debtors to all the great spirits of our time-honored profession refuse to contribute our little mite to the great common treasury of knowledge? Away with such miserable policy as this! Freely we have received, let us freely give. I have not patience to dwell upon this subject. The "cursed thirst for gold" is always detestable, but rarely more so than when it invades a benevolent profession and would speculate in human misery.

Dr. Bigelow's reasons for "patenting" in this case are curious.

Reason I. Because the ether is capable of abuse, and therefore

"should be restricted to responsible persons." That is, to such as can pay for it.

Corollary 1. People who have money cannot abuse sul. ether.

Corollary 2. Poor people cannot be trusted with knowledge.

Reason II. Its action (that of ether) is not thoroughly understood, "and its use should be restricted to responsible persons" (people who can purchase the right to use it).

Corollary 1. People who have money can thoroughly understand what is not "thoroughly understood."

Corollary 2. Poor people have poor intelligence.

Reason III. "One of its greatest fields is the mechanical art of dentistry, many of whose processes are by convention secret, or protected by patent rights. It is especially with reference to this art that the patent has been secured."

"Producing stupor" belongs to mechanical dentistry. Certainly; who can doubt it. It is lawful to "patent" anything connected with "mechanical dentistry"—certainly. The profession think otherwise, but no matter: mechanical dentistry differs from other branches of "mechanical surgery," chiefly in this, that it is a fair field for patents. The reason is obvious—to men whose heads are full of ethereal gas.

Corollary. It is lawful to keep secrets from dentists, provided they be imparted to the surgeons of the Massachusetts General Hospital.

Baltimore College of Dental Surgery, Dear Editor, thine ever,
December 15, 1846. T. E. B.

REPLY TO A REVIEW OF MISS BEECHER'S LETTER.

To the Editor of the Boston Medical and Surgical Journal.

Sir,—The leading article in your December No. is a review of a letter of mine in the New York Observer, on the Water Cure. In that letter I aimed briefly to set forth these points, viz.:—The water cure is not opposed to, but rather is in strict agreement with the long-established principles of medical science. For evidence of this I referred to a work of Dr. Johnson, and not, as the reviewer asserts, to a work of Dr. Billings. This practice I claimed to be advocated and adopted by some of the best informed medical men in this country and abroad. It is not a hazardous method, far less so than drug medication, and in proof of this I gave, not my own opinion, but a quotation from Dr. Pereira, a standard writer on materia medica, who sets forth some of the dangers of drug medication. This I did not "endorse," as the reviewer charges, inasmuch as it is a subject on which I have little information. I still further remarked that the writers and leading practitioners of the hydropathic treatment do not claim that it is a "*cure-all*" (as the reviewer maintains they do), nor do they discard the use of drug medication. It is not so simple a method that ignorant empirics can use it safely or successfully, nor can it ordinarily be safely prosecuted at home without the advice of a physician. It is not a hazardous method, when pursued under the care of a well-edu-

cated physician, who has taken proper methods to understand this peculiar practice. Its success is not claimed, by those who practise it, to be wholly owing to the use of cold water, but much to the strict enforcement of the laws of health. It is not so harsh and unpleasant as is commonly supposed, and it is *more successful* and *quite as comfortable* in the *cold* as in the warm months. Dr. Wesselhœft's establishment is probably the best in this country, and he is a man remarkable for sagacity, honesty and benevolence. I might have added, that he has received a thorough and extensive medical education at different German universities, was examined and licensed by government to practise medicine, that he did practise five years, in connection with gentlemen attached to civil and military hospitals, that during this time he and his associates became initiated in the homœopathic system, that he was appointed by government to investigate the claims of several water-cure establishments, and that to perfect his knowledge he resided several months in some of the most celebrated of these establishments.

In reviewing my letter, of which the above is a synopsis, the reviewer states that "these three objects," are aimed at by me: "first and mainly," to show that I am a patroness, and that a new system of medicine hangs by my apron string; secondly, to show the world that I understand a great deal about matters and things in general, and medicine in particular; and thirdly, to advertise a protegé of mine at Brattleboro'. He then quotes what I said of Dr. Johnson, and claims that I said it of Dr. Billings, and adds an argument to prove that Dr. Billings never wrote what he claims that I attribute to him. He also speaks of homœopathy as my "other idol," although I never expressed any confidence in it at any time, nor recommended it except as an escape from more dangerous treatment. He also speaks of Dr. Wesselhœft as one of the class of foreigners "who come from nobody knows where, or for what."

From the above, it is manifest that the reviewer is one whom it would be useless to attempt to answer, and I only ask that this short notice of his article may be inserted in your Journal, that my friends of the medical profession, of whom there are many that I greatly respect and whose good opinion I value, may not be misled as to what I actually have written on this subject.

During the last five years I have travelled extensively in the northern, middle and western States, and owing to my health, have been brought in contact with many of the most learned and intelligent physicians. In this time I have had occasion to observe, to a wide extent, the declining confidence of the most intelligent classes in the prevailing regular system of medical practice, and their extensive resort to homœopathy, not so much from a conviction of its claims as from a feeling that it involves less risk. I have noticed, also, the open, or implied concession among the most candid and intelligent medical men, that drug medication has been carried to an excessive and most pernicious extreme by the profession generally.

I have noticed, also, that in meeting the claims of homœopathy and hydropathy, the profession have in fact been carrying on a war against the *very*

principles and the *only* principles by which the regular practice of medicine is sustained. The *frequency* and the *uniformity* with which certain remedies, in the same appropriate circumstances, are followed by cures, is the only proof that sustains medical practice, and when the public find this kind of evidence sneered at, or argued down, because it sustains a system not yet generally established, it either lessens confidence in all evidence of this kind, or in the honesty of those who take such a course. It is this unwise method of defending their profession, which, as it seems to me, is a great support of empiricism and quack medicines among the more intelligent classes in the community.

A late medical writer says, if a medical man "be tolerably conversant with the current medical literature of Europe, he must know that douches, cold baths, cold-water dressings, and to a great extent the *hydropathic treatment*, have become a part of the regular medical and surgical practice of private physicians and of public hospitals, so that it can no longer *honestly* be scouted as a humbug, or German abstraction, or questionable novelty. Hydropathy has become a part of liberal medical science, and it argues inexcusable ignorance, or something worse, in a liberally educated medical man to deny or conceal it."

If this be so, and if the popular and cheap works on hydropathy, so abundant in this country, prove this, and also give evidence that this practice is in agreement with the rules of physiology, hygiene and common sense, will not sneers, or ignorance, or misrepresentation, in reality, do more injury to the members of a profession who thus attack, than to the object of odium?

Hydropathic institutions are now rising in all quarters; some are mere money-making concerns, which must dupe and destroy; others are conducted by philanthropic and scientific men, with the best of motives and results. Would not the interests of medical science and of humanity be promoted by such discrimination as shall secure the support of the medical profession to those that are worthy, and its powerful influence only against the undeserving? Respectfully yours,

December, 1846. CATHARINE E. BEECHER.

MEDICAL CASES AT THE WEST.

To the Editor of the Boston Medical and Surgical Journal.

DEAR SIR,—I send you the following, to me, at least, interesting cases. If you deem them worthy, you will please give them a place in your valuable Journal.

CASE I.—*Remarkable Appearance of the Surface previous to and after Death.* Mrs. I. C., aged 56. Short, thick-set, plethoric habit. First called to see her Sept. 9th, 1844. Had been complaining for several days; not confined to the bed till yesterday; had no treatment. There appeared to be a severe congestion of the stomach and bowels. Liver inactive, jaundiced appearance of the surface and conjunctiva;

tongue coated dark-brown; fever slight and of the remittent form. Prescribed a brisk cathartic, to be followed by pulv. Doveri.

Sept. 10th.—On my visit found the cathartic had operated only once, and the evacuation then small. Symptoms nearly the same as yesterday. Pulse irregular and compressed. Another cathartic of calomel and jalap, followed by salts and senna, and, if necessary, injections.

11th.—The cathartic given yesterday had produced only three or four small evacuations. She was now put on an alterative course of mercury, combined with Dover's powder and quinine, for three days. Bowels moved by injections. Abdominal region considerably swollen. Blisters and fomentations have been freely applied over the stomach and bowels.

15th.—No effect on the mouth from the calomel. Left off the submuriate, and ordered six grains blue mass every six hours for forty-eight hours.

20th.—No effect being produced, and the patient gradually sinking, the blue pill was discontinued. Brandy and quinine administered. Bowels still torpid, and much difficulty in obtaining an evacuation.

23d.—In consultation with a neighboring physician, it was thought best to again try mercury. Calomel in alterative doses every six hours.

25th.—Can perceive a slight effect upon the gums.

26th.—Ptyalism well established.

27th.—Symptoms more favorable; swelling of the abdomen entirely gone; and no difficulty to get an operation from a cathartic.

Oct. 6th.—Patient so that she sits up; mouth nearly well. Dismissed her as convalescent.

14th.—Again called to see her. Found her in a state impossible to describe. Her entire surface hard and crisped, exhibiting nearly the appearance of a *hard-baked pig*; not swollen, except the eye lids, which were swelled and inflamed; mouth and eyes partially opened, and no power to open or close them more; tongue clean; articulation not bad, except where labials were necessary; senses perfect from the first. Surface cracked in many places through the entire cellular substance, in the region of the joints, and in some places the bones plainly to be seen. Was told that she had been getting in this situation for two or three days. Great tenderness of the surface. She lingered till the 17th, and died at 8 o'clock, A. M. No *post-mortem* examination could be had.

I present this case as it appeared, in short. If you, or any of your numerous and scientific correspondents, have seen a similar case, or can suggest anything in regard to the treatment or cause of this peculiar appearance of the surface, they would perhaps confer a favor on some (one at least) western practitioners, by giving it to the profession through the Journal; for we at the West do not have as good an opportunity of seeing a great variety of cases as those at the East, our diseases being mostly intermittent and remittent fevers.

Case II.—*Periodical Headache, Neuralgia, cured by Large Doses of Quinine.* Mrs. B., aged 35. Spare, nervous habit, the mother of several children; been in the country twenty years, her father being one

of the first settlers of this town. Was attacked, May 10th, 1845, with violent pain in the region of the superior maxillary and temporal bone on the left side. Thinking it might proceed from a carious tooth, I extracted it, which, however, gave no relief. I administered a full dose of morphine, with very little relief. The paroxysm lasted about six hours, when it gradually left her perfectly easy, feeling considerably exhausted. The next day, about the same hour as the day preceding (10 o'clock, A. M.), she was again attacked in the same manner—and notwithstanding almost every kind of treatment which is mentioned in books—counter-irritation, cathartics, alteratives, tonics, nervines, opiates, &c., the paroxysms continued to recur regularly every day for two weeks. Nothing afforded even temporary relief, except dry cupping, which somewhat relieved the pain while the cups remained applied over it. It being about the time that the subject of large and small doses of quinine was agitated by Dr. Van Buren and others, I determined to make a trial of large doses in this case. I accordingly, during the intermission, administered, once in four hours, twenty grains of quinine, and with the most happy results; for she never, from that day to this, has had an exacerbation, and has enjoyed, for her, unusually good health. Having been so long a resident here, we can hardly suppose she was not thoroughly acclimated, or that this nervous pain, unaccompanied by fever, was caused by that peculiar miasm which is said to be the cause of the fevers of this climate.

Very respectfully yours,

Orion, Oakland Co., Mich., Dec. 1, 1846. I. G. Bugbee.

BLEEDING.

(Communicated for the Boston Medical and Surgical Journal.)

"Doctor Dickson, the celebrated Thermal practitioner in England, has nearly abolished the use of the lancet, and considers it fatal in apoplexy and paralysis. Several well-attested cases of apoplexy have been relieved by no other remedy than pouring cold water on the head from an elevation, and persisting in it for twenty or thirty minutes. Inflammation on the brain is relieved by this cold effusion, and the patient recovers."

The foregoing stupid and lying paragraph is going the rounds of the newspapers; and but for the mischief it may do if anybody is silly enough to believe it, might properly be treated with silent contempt. It inculcates the falsehood that apoplexy and paralysis have been uniformly treated by the profession with the "lancet," and teaches that when these diseases have been fatal, the lancet has been the cause, which is a falsehood equally flagrant. Its stupidity is apparent in attempting to puff "Dr. Dickson, the thermal practitioner in England," by ascribing to him the "abolition of the lancet," which is falsely alleged to have been effected, since the rational use of this agent was never more general in England than now. And the opinion ascribed to him of the "fatality of bloodletting in apoplexy and paralysis," is of itself sufficient to write his epitaph, and justly consign him to the tomb of the no less celebrated Thomson, who used to teach that "*If God Almighty had intended that*

man should be bled, he would have left a hole in the veins of his arm, and a cork to stop it." Such logical arguments are worthy of his successors in their war of extermination against "the lancet," and we recommend this citation for the next American edition of Hahnemann's and Dickson's books.

But what shall we say of the prescription ascribed to this "thermal practitioner," that of pouring cold water on the head from an elevation, and persisting in it for twenty or thirty minutes," and this in "well-attested cases of apoplexy" and "inflammations of the brain." To talk of this precise mode of employing the cold effusion as a novelty, and attribute it to Dr. Dickson as a discovery, is superlatively ludicrous, when it is a remedy which has been used ever since the day of Hippocrates, and will be found recommended in every standard work on practical medicine for certain morbid states of the brain from his day to the present time. Every medical tyro has been taught it, and every well-informed physician has thus subdued the high action and violent temperature in certain fevers involving the brain.

But this paragraph refutes itself by directing a "persistence in pouring cold water on the head for thirty minutes from an elevation;" because it proves that the writer of this puff has never used the remedy, nor even witnessed its use. Every practical man knows that so potent is this agency, that even in the cases to which it is adapted, it is hazardous to the life of the patient to continue it half the time named, and that the effects are so powerful that every practical writer or teacher on the subject, accompany its recommendation with cautions and warnings of its danger. And yet it is proposed that the public at large should adopt this practice in the most critical and dangerous diseases, without professional guidance; and an appeal is made to the people in a New York paper to this effect, as one of the fruits of chrono-thermalism, which, it is affirmed, instead of bleeding for apoplexy, cures it by simply pouring a little cold water on the face and head of the patient.

Apoplexy is essentially a "hemorrhagia cerebri," in the language of Boerhaave, nor should this name be ever applied to simple turgescence of the vessels, or venous congestions, as is often ignorantly done; for if effusion within the cranium, or beneath the theca of the vertebral canal, has not occurred, it is not a "well-attested case of apoplexy," even though more or less paralysis may be present, as the result of compression by distended or engorged vessels upon some portion of the nervous centres. This definition is given with the design of demonstrating that the pathological state in true apoplexy is one in which bloodletting may, or may not, be necessary; may, or may not, be contra-indicated; according to the nature and extent of the effusion, the pre-existing morbid state, and the condition in which the patient is found when visited, which will vary according to the time which has elapsed after the commencement of the paroxysm. Nor can any man living decide for or against the cold effusion in any disease of the brain; for or against the use of the lancet, without endangering life; unless these discriminations are previously made. The same may be said of the treatment of paralysis,

which, however, is seldom fatal, except when it is the direct result of apoplexy, and preceded by its paroxysm.

That apoplexy and its terrible results have been *prevented* by the timely and judicious use of the lancet, might be demonstrated to the common sense of the unprofessional, by a reference to the frequent instances of relief from all the symptoms of an approaching paroxysm, by a spontaneous or rather critical bleeding at the nose. I have seen a brace of ignoramuses of the *anti-lancet* school trying to arrest such a bleeding by ice, alum, and more active styptics; and even plugging the nostrils before and behind, terrified at their failure to stop the blood, which if they could have done they would have killed the patient by inducing apoplexy, which was only prevented by this effort of the *vis medicatrix naturæ*, resorted to *se defendendo*, as the lawyers say. In such cases, the curative symptoms not being distinguished from those which are morbid, betrays the profession into blunders of which they ought to be ashamed. Instead of stopping the flow of blood in such a case, it ought to be encouraged, and even aided by "the lancet" if tardy, art following the true indication of nature.

But this subject may be pursued in another article; in which the importance, utility, and *indispensable necessity* of the lancet, and the definite *invariable* rules for its innocent and safe employment, may be exhibited and illustrated by the actual history of diseases, and clinical experience; together with a vindication of the propriety and efficacy of bloodletting, which may serve to stop the mouths of ignorant gainsayers and rebuke their presumptuous folly. Enough has been said to admonish the secular press of the mischief they are ever inflicting upon the public health by incautiously permitting the insertion of medical prescriptions for diseases, from questionable sources. They may regard such notices as that at the head of this article to be a harmless puff of some pretender, and even laugh at any remonstrance, but the victims of such paragraphs may have cause to say, as the frogs did to the boys who stoned them, "It may be sport to you, but it is death to us." R.

DISLOCATION OF THE HUMERUS OF FIVE WEEKS' STANDING REDUCED BY MEANS OF DR JARVIS'S SURGICAL ADJUSTER.

Reported by Robert King Stone, M.D.

Clinique of Prof. J. F. May; Columbian College, Washington, D. C., Nov. 21st, 1846.—Wm. Boothman, ætat. 36, an Englishman, of exceedingly robust and muscular frame, presented himself to-day, on account of a dislocation of the humerus, the origin of which, he thus describes. About six weeks since, he suddenly ceased his unfortunate habits of intemperance, and in consequence had a slight attack of delirium tremens; whilst in this condition, and crossing a street, he fell, striking the back of his right shoulder against the curbstone. He was not aware that any dislocation had taken place, but supposed that the pain, great tumefaction and discoloration which extended to the wrist,

were merely the results of a violent bruise. It was but a few days before presenting himself, and after the tumefaction had subsided, that he observed the permanent immobility of the arm, and the deep depression under the acromion. Examination detected a dislocation downwards and forwards, with the head of the bone resting under the edge of the pectoralis minor, the elbow thrown backwards and very slight mobility in its new position. Much numbness of the arm had existed since the accident, on account of pressure on the axillary plexus, and was still a subject of complaint. It would be proper to remark that the right clavicle had been fractured in his youth, and its bad coaptation produced deviation backwards and slightly upwards of the acromion. Careful examination satisfied Prof. May, that although the head of the bone was but slightly moveable, no danger was to be apprehended from any complication of the axillary artery.

Although previously preferring and exceedingly successful with the pullies, Prof. May acceded to my wish to apply the apparatus of Dr. Jarvis, in a case so capable of testing its powers. Its application was preceded by vs. ʒ xviij., and an ineffectual attempt to nauseate with tart. antim. and ipecac. Traction for a few minutes, in connection with the rotation so fully pepnitted by the adjuster, seemed greatly to increase the mobility of the head of the bone, and the rachet bar was left in this position for some time, in order to weary the muscles and act gently upon the adhesions. This alternate extension and rest was continued at proper intervals, when just before the moment at which reduction would have been perfectly practicable, the extending bands, which had not been previously well examined, all gave way, leaving only the gain of greater mobility at the head of the bone. As it was impossible to remedy the accident at that moment, Prof. May applied the sheets, &c., in the ordinary method, assisted by Profs. Miller, Johnston and others, but without success. Recourse was next had to the pullies, which being gently and steadily applied for a long time, until the man's endurance was exhausted, were also laid aside.

In questioning the patient as to the relative suffering during the three processes, he declared that the action of the adjuster was by far the least painful, and at the moment of snapping the extending bands, he "felt the bone at its socket, and that it slipped away."

Nov. 23d.—Vs. ʒ xx. Tart. antim. and ipecac. with much better effect; the man for the first time acknowledged nausea. Having procured stout cords, we proceeded to the reduction with Jarvis's adjuster. The axilla was filled with a mass of cotton as usual, and the pad of the fork placed thereon. It may be worthy of remark, that on this occasion, the perineal was substituted for the axillary fork, on account of the man's great depth of thorax, as it was observed that on bringing the elbow forward, on Saturday, its end inpinged upon the sternum, causing excessive pain. The arm being flexed at the elbow, the extending cords were made fast and extension commenced. At this stage of the operation, the vast superiority of Dr. Jarvis's instrument was manifested, for whilst extension was made precisely in the axis of dislocation, Dr. May, with one

hand in the axilla and the other grasping the forearm, had the most perfect command of the limb, and could produce rotation at his pleasure. When satisfied that the head of the bone had been brought low enough in the axilla, and sufficient mobility existed, a broad band was passed under the neck of the humerus and tied over the shoulders of the operator. The forearm was then resigned, and with both hands he grasped the bone in the axilla, at the same time throwing back his body, so that the head of the humerus was forcibly lifted upwards and outwards. Whilst this manœuvre was performed, the elbow was rapidly thrown forwards at "the word" and "hard up" against the ribs, and the extending bands instantly relaxed. As a matter of course, the bone entered the glenoid cavity precisely in the same manner as it left it.

Although this case had resisted the best efforts with the sheets and pullies, the reduction was effected in less than thirty minutes with the adjuster. Of course a very slight depression remained after the reduction, on account of the wasting of the deltoid, &c.; but when a pad was placed in the axilla and Desault's apparatus applied, the roundness of the shoulder was restored, making but a slight deduction for the deformity from the old fracture of the clavicle. This result is a source of gratification to the operator and those surgeons who witnessed it, as it proved conclusively the great power of the instrument, and that the manœuvre could not have been thus performed with the aid of any other. I should remark, that the method of commanding the head of the bone by Prof. May, in connection with the instrument, was novel to myself, although I had the pleasure, a year ago, of seeing Dr. Jarvis apply the adjuster in a similar case at the Military Hospital of Val de Grace at Paris.

In the application of this instrument, the proper rule for traction seems to be, to draw down until the patient feels it severely, and then to rest a few moments and rotate, waiting until the muscles are so wearied as to enable us, when extension is resumed, to make great progress at a moment when they are unable to resist. Extension and rest are thus to be alternated, until the operator is satisfied that the head of the bone is brought down parallel with the plane of the glenoid. In this case there was no deviation in extension from the axis of dislocation, and the head was made to retrace its path precisely; then by lifting it forcibly, whilst at the time of relaxing the extension, the elbow was brought forwards and close to the thorax, the bone was set free in a line outside of the glenoid cavity. When thus set free, the muscles were made available, and even the triceps and pectoralis assisted in the reduction.

The patient is now perfectly well—only carrying his arm in a sling as a precautionary measure.

Washington, D. C., Dec. 20th, 1846.

EXPERIMENTS WITH THE LETHEON IN NEW YORK.

[Communicated for the Boston Medical and Surgical Journal.]

THE attention of the professional public has been recently fixed upon a discovery said to be capable of preventing the severe sufferings of pa-

tients undergoing surgical operations. The mere announcement of such an improvement cannot fail to interest every man of common humanity, while to the operating surgeon it opens the prospect of a most gratifying triumph of his art. Every fact, well attested, is of interest in relation to the history of this new expedient to relieve human suffering. The following cases having occurred in this city, and being the first operated on under the influence of the new process, may, perhaps, be regarded of sufficient importance to deserve record.

On the 20th ultimo, Dr. Horace Kimball, an accomplished dentist of this city, put in my hands a recent No. of the Boston Medical and Surgical Journal, containing an article from the pen of Dr. Bigelow, on this subject. There was no room to doubt the respectability of the source from which the information was derived, and accordingly I made arrangements with Dr. Kimball to have the inhalation administered to a young lady who was to be operated on for the removal of a scirrhous tumor under the right mamma on the 21st ult. Owing, however, to his inability to avail himself of the use of the only apparatus for its administration at that time in New York, the lady, after having had her hopes raised, was obliged to submit to the operation without being able to participate in the benefits of the new discovery. It was successfully performed, and she has since entirely recovered.

On the 4th inst., Dr. Kimball having become the agent of the discoverers in this city, and having provided himself with the necessary apparatus, afforded me an opportunity of making a trial of the inhalation at my office, No. 11 Carroll Place, in the presence of several professional gentlemen and medical students, in the case of a young lady from Brooklyn. The case was one of enlarged tonsils. The patient, after respiring the ethereal vapor for a few minutes, became apparently insensible, breathed heavily, had the pupils dilated and the pulse slightly accelerated, when on attempting to open her mouth, I found the jaw closed spasmodically. This obstacle was in a minute or two overcome, and her mouth was opened, when a pleasant smile passed over her countenance. The left tonsil was excised, apparently without her notice. I laid down the instruments, intending to have the inhalation repeated before the removal of the second tonsil, but at the suggestion of Dr. Kimball, that she was still under the influence of her original dose, I proceeded to the removal of the second tumor. She soon afterwards opened her eyes and smiled with returning consciousness. She declared that she had no knowledge whatever of the first operation, but remembered smiling at having her mouth "so nicely opened."

The operation in the first instance was thus perfectly successful, and in the second was partially so, and but for the time lost, quite unnecessarily, both the tonsils might have been removed during the period of her entire unconsciousness.

Another operation was performed on a boy who had been my patient in 1840, with a double hare-lip, complicated with a terrible fissure of the palate. In this case, which had been perfectly successful, the end of the nose was drawn down a little to the lip, and he had been desirous him-

self of trying the effect of an incision at the upper part of the lip, with the view of liberating it, and giving a better expression to these features.

He inhaled the vapor for two or three minutes, and became entirely insensible. The knife, a small straight bistoury, was passed just under the ala nasi of the left side through the upper lip, and brought out at the corresponding point on the other side, completely separating the lip from the nose, without apparently occasioning the least sensation.

It was several minutes before he recovered his consciousness. On being interrogated, he declared that he was not sensible of being hurt—did not know when he was cut—and felt no pain. His appearance and expression of countenance corroborated entirely his declarations, and left the fullest impression on the minds of all present, of the perfect insensibility occasioned by the ethereal inhalation.

As I had repeatedly inhaled the vapor of sulphuric ether, as long ago as the year 1822, and as I had seen it inhaled repeatedly by others, I was desirous of trying on myself the effects of this agent, in order to satisfy myself whether I could discover any difference in its apparent effects from those of the vapor of ether.

I was thrown into a state of perfect insensibility, unaccompanied with the least pain or inconvenience, but on the contrary I felt, on recovering, as if I had been in a beatific vision. No headache or unpleasant sensation of any kind followed the inhalation, and I recognized precisely the sensations which I had formerly experienced from the effects of ether.

On the 8th of this month I was present, by the polite invitation of my distinguished friend, Dr. Mott, at an operation which he performed on a lady for the removal of a cluster of tumefied glands from the right axilla. After inhaling the vapor for a sufficient time to induce a state of insensibility, an incision of four or five inches in length was made parallel to the edge of the pectoralis major, and after some progress had been made in the operation, the patient was asked by Dr. Kimball how she felt. She replied, "very comfortable." "Do you feel any pain"? "No." To the same question repeated after a short interval, a similar reply was made—and after a further lapse of time the patient partially arousing, inquired, "have they begun the cutting"? —thus manifesting her total unconsciousness of what she had passed through, up to that period. Afterwards her sense of pain appeared for some time considerably blunted, but she became gradually more and more conscious of what was done, until at last her sense of suffering seemed to be entirely natural.

In this operation, which, from its position and the implication of important parts, was necessarily protracted, the influence of the narcotic agent was not sufficiently permanent to prevent entirely the sense of pain; yet it was evident, both to the accomplished operator, and to all spectators as well as to the patient herself, that her sufferings were in part averted entirely, while the rest was greatly mitigated.

On the 10th inst. I accompanied a young lady to Dr. Kimball's, who had a second bicuspid tooth on the left side of the upper jaw removed, under the influence of the ethereal inhalation. In this case the patient

raised her hand to the mouth as if to prevent the process, but when it was accomplished she manifested a total ignorance, not only of pain but of all knowledge of the operation. She declared that she knew nothing about it, and remembered only a delicious dream or vision.

No evil consequences followed in this or either of the preceding cases, and the effect of what I have seen has been on my own mind a firm conviction that the discovery of Drs. Morton and Jackson has added to the resources of the surgical art, one of the most invaluable benefits of which modern times can boast. It is certainly a great boon to suffering humanity, and they deserve the unmingled gratitude of mankind. In amputations, and all other surgical operations which can be performed at once with rapidity and safety, this discovery furnishes a perfect immunity from pain; and in those more protracted, a great alleviation may be obtained; while that most excruciating operation, the extraction of teeth, which everybody has more or less frequently to endure, is no longer an object of dread, since by means of the inhalation the patient is rendered absolutely and entirely unconscious of pain.

In reference to the *rationale* of the process, it will immediately occur to the practical surgeon that in cases of cerebral injuries, where coma exists, and where operations for cutting the scalp and removing bone by the trephine and saw, are habitually performed without consciousness on the part of the patient, a case is presented parallel to that of insensibility from inhaling the vapor of ether. The ether is absorbed with the oxygen of the atmosphere during inspiration. Is it not natural that it should excite a certain degree of dilatation of the vessels of the brain, slight and evanescent certainly, but still producing a temporary pressure on the cerebral substance, thus furnishing at once an analogy with the coma of compression, and an explanation of this most singular and interesting phenomenon of insensibility to the knife induced at will, and with an impunity as real as it is surprising.

In furnishing this record of the first cases of surgical operation, performed in New York under the influence of the Boston discovery, I feel that I am contributing my humble share to the mass of testimony which my fellow men have a right to demand on an occasion which appeals to the love of human nature as well as to the pleasure and pride of a profession in itself most honorable, and which receives from this discovery a happy addition to its glorious and humane triumphs. A. L. Cox.

No. 11 *Carroll Place, New York, Dec.* 18*th*, 1846.

THE BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON, DECEMBER 30, 1846.

Blood-root.—In consequence of the statements of correspondents from time to time, on the medicinal value of sanguinaria Canadensis, we take

the liberty of again directing the attention of practitioners to the subject. Without having had an opportunity to test its efficacy as extensively as the acknowledged merits of the article demands, our personal recollections of the good effects of an external application of the pulverized root to the surfaces of bad-conditioned ulcers, leads to a belief that much more might be accomplished by this simple native production, than has been supposed could be, even by those who are strenuous in recommending it with confidence as an extraordinary remedy. Having, on some former occasion, adverted to the excellent effects of the fine powdered blood root, applied daily to that class of ulcerated legs which are common but difficult to heal on men advanced in years, it would be but a repetition of former suggestions to say more on this head. Again,—ulcers of the breast, of the deep, ragged kind, having inflamed margins, accompanied by a knotted hardness at different points in the neighborhood of the focus of the disease, are singularly benefited by this same treatment. Of the various internal uses of the tincture, which is the more common mode of administration, we apprehend there is reason for expecting far greater results from it than have yet been obtained. If, as has been suggested, it is efficient in gangrene, the present is a good time for bringing this mode of treatment before the schools; and as in many of them the daily propositions to the students are illustrated in hospitals, where a variety of maladies are presented, this remedy for gangrene might be fairly tested.

Surgical Cliniques at Laporte Medical College.—Newspapers are occasionally received from the far west, containing graphic descriptions of the character of the diseases presented at Dr. Shipman's Surgical Clinique, at the University School of Medicine, in which that gentleman holds the chair of Operative Surgery. While he is giving the best instruction to the students of the institution, he is also giving advice of great value to the poor, who are induced to traverse extensive regions of country to avail themselves of Dr. Shipman's chirurgical skill. We congratulate the college in securing the services of one so well calculated to increase the reputation of the medical department of the university; and the people, on having access to an experienced operator, whose success is based on a familiar knowledge of the physical organization of man.

Phrenology in London and Boston.—What a pity that the magnificent collection of casts and skulls belonging to the London Association of Phrenologists, should have been scattered all over the kingdom. The society is dead. Here in Boston, a Phrenological Society, the skeleton only of which remains, was once distinguished for its activity, and the enrolment in its archives of the names of some of the highest geniuses on the continent. The Boston society's collection of heads is large, and in fine condition,—but its richest gem is the skull of Dr. Spurzheim, admirably prepared, which has a small iron safe appropriated to its protection. No meetings of the members are now held. What has become of the cabinet? It should be lodged in a fire-proof building—for it is exceedingly valuable, aside from all phrenological considerations.

Dublin Quarterly Journal.—Although we have in vain attempted to maintain a regular exchange with this excellent publication—and are even

in doubt whether the letters we have addressed to the present and late editors, ever reached their destination, we are nevertheless happy to reassure both gentlemen, that their efforts to accomplish the exchange are perfectly satisfactory, and it is hoped we shall yet succeed. Few, if any of the medical periodicals from Europe take a higher rank than this. It is characterized by peculiar fairness, dignity and energy of purpose. There is a massiveness in the majority of the articles, that makes heavy demands upon the hours of the reader, like a well-constructed volume; but if they are ponderous, they also abound in essential thoughts and intimations, which abide in the memory, and therefore permanently benefit whoever patiently sits down with a determination to understand them. While it maintains its present reputation for consistency, Dr. Wilde is destined to realize the highest aspirations of his ambition. To the patronage of our countrymen—those who appreciate the profound attainments of men who are pillars in the modern temple of medicine—we can conscientiously recommend this erudite quarterly.

Improvements in Medicine—Dr. Dugas's Introductory.—Prof. L. A. Dugas, of the Medical College of Georgia, on the 7th of Nov. delivered an introductory to his course of lectures on Physiology and Pathological Anatomy, which has since been published by the class. Dr. Dugas is not a brilliant writer, but he is just to the merits of others. He gives good weight and measure in speaking of the characters and genius of those who have enriched the medical literature of the world, or especially enlarged our knowledge in any particular department of the profession. If we could do by him as generously as he has by those whose names are presented for the admiration of his students, a considerable part of the pamphlet would be republished; but the press of local matter admonishes us to economize our pages as much as possible.

Care of the Teeth among the Brahmins.—Mr. Joseph Murphy (says the Dental Mirror), in his Natural History of the Human Teeth, informs us, that "The natives of Hindostan, the Brahmins in particular, are extremely delicate in every point relating to their teeth. Every morning, when they rise, they rub them for upwards of an hour with a twig of racemiferous fig tree, at the same time addressing their prayers to the sun, and calling down the blessings of heaven on themselves and their families. As this practice is prescribed in their most ancient books of law and divinity, we imagine it coeval with the date of their religion and government. It exhibits a curious proof of the regard which this polished and scientific people had for the purity and beauty of the mouth, when so simple a practice is inculcated as a law, and rendered indispensable as a religious duty."

The Brahmins are said to have finer teeth than any other people in the world. This is, without doubt, in a great measure to be attributed to the attention that they pay to their cleanliness. These people, also, separate their teeth with a file, as soon as the second set is perfectly formed, but we cannot determine whether this be for the purpose of preventing decay, or of adding to their beauty."

New York Correspondence.

"See ocean into tempest tost,
To waft a feather or to drown a fly."

The homœopathics in New York are in a fair way to devour each other, after the manner of the Kilkenny cats. At their late convocation, it was ascertained that their most prominent and conspicuous partizans, including their acknowledged leader (now that Dr. Gram is no more), had been bleeding, puking, purging, blistering, and mercurializing their patients, while sailing under the Hahnemann flag, and even alternating all these remedies with pellets of sugar of milk, and infinitesimal dilutions. It was in vain that these latter claimed that these allopathic remedies were "homœopathic to the disease," and therefore lawful ammunition in the "work of death;" the honest men who have been duped into the silly conceit that "the doses of drugs cannot possibly be too small," as taught by their great German master, and that the higher dilutions "if shaken from above downward" develope potenzes, which will "cure all incurable diseases," regarding the "tricks of the trade" to which many of their brethren were addicted, as forfeiting their claims to be recognized as real Simon Pures. But on a trial of numerical strength in the election of officers, it was found that one of the deserters from the pure faith was elected Corresponding Secretary, the most important office in the sect. Whereupon some twenty or more, who claim to be pure homœopathics, in contradistinction to those who run an accommodation line, which takes in all sorts of passengers, forthwith repudiated all connection with the Society. Another Society is to be formed, from which all are to be excluded who do not strictly adhere in all cases to the sugar pellets, moistened with "the infinitesimal solution of nothing." Each of these divisions of the homœopathic army now open a battery on each other, and the result of the conflict cannot be doubtful, with such redoubtable heroes as Gray and Hull on one side, and Kirby and Snow on the other.

Meanwhile the days of Hahnemannism are numbered in this city, for all confidence in its disciples has departed. Its greatest dupes now only take the pellets of sugar of milk, when there is nothing the matter; and whenever they are sick, they abjure homœopathic trifling, and employ a physician proper who has maintained his integrity in the profession. It is this that has driven many of their practitioners to proffer their patients a resort to allopathy, when they will no longer trust to homœopathy, they professing to practise on either system, or both, to suit the times. This device may serve the purpose of those who have a smattering of knowledge in the old school, but those who know nothing but homœopathy are in a bad fix. *Hanc illæ lachrymæ!* Some of them have taken hold of hydropathy, others of mesmerism, and one of them has become a new recruit to chrono-thermalism, being No. 2 of this new sect. Shade of Hahnemann! *O tempora! O mores!*

Ligature of the External Iliac Artery.—Prof. Mott, of New York, has again tied the external iliac artery, for a diffused aneurism in a young gentleman from Alabama, who had been wounded in a conflict in the "field of honor" by a pistol ball. The operation was performed a few days since. We learn that this is the seventh time this artery has been taken up by this able surgeon. During the last week the same gen-

tleman removed a carcinomatous mamma from a lady now in the 90th year of her age. The wound has nearly healed, and she bore the operation like a heroine. She had at first consented to try the ethereal vapor, and the apparatus was prepared. But after a few inhalations, when she began to feel its earliest effects, she hastily withdrew her lips from the mouth-piece, and said to Dr. Mott, who sat quietly with his scalpel in his hand, "No, Sir, I will not be stupefied, you may cut." The case is unique in one respect, certainly, for though an active old lady in body and mind, she has passed her 89th year, and the operation has undoubtedly extended her life, while she can scarcely survive long enough at her age to suffer from the return of the disease in any other gland.

Chemistry.—The equivalents of silver, potassium and chlorine, have been hitherto calculated from the results of the analysis of the chlorate of potass. M. Maumené employs a new method, based upon the decomposition of the oxalate and acetate of silver, and finds the following equivalents, which differ only in a slight degree from those heretofore adopted:—Silver, 1390.42; chlorine, 442.04; and potassium, 487.78.—*Medical Gazette.*

Medical Miscellany.—Four thousand out of a population of thirty-five thousand have died of cholera in Bagdad.—Dr. Connelly, an army surgeon, is a prisoner in the hands of the Mexicans.—Dr. Brook, of Manchester, N. H., took his departure suddenly for the South, on account of an alleged infraction of the law.—One Dr. Cobb, in Vermont, has written a book, "which teaches a man to find out what he knows by looking in a common looking-glass."—A destructive fever was raging at the Cape de Verds, at the last accounts.—A large number of soldiers are in the hospital at Santa Fe, who were made sick by drunkenness and other vices.—One Dr. Eastman, of Lynn, says a paper of that town, is about opening a hydropathic establishment at Dracut, opposite the city of Lowell.—A cold-water journal is about being published at Lynn—at one dollar a year.—The Rev. Le Roy Sunderland, the pathist, minus the hydro and homœo, is lecturing to large audiences in New York on subjects that always take well with a certain class of hearers.—Dr. G. Bailey, Jr., is to be editor of a newspaper at Washington.—As usual there is an excellent class in attendance on the medical lectures at Yale College, the present season. The number does not equal some other institutions, but in no place is the course of instruction more perfect or thorough.

To Correspondents.—A paper on "Impure Homœopathy" came too late for insertion this week.

Died,—In Columbia, Pa., Dr. H. McCorkle, 70.—At Enosburg, Vt., Dr. Elphaz Eaton, 75.—At Edinburgh, on the 11th of October, Dr. John Thomson, late Professor of General Pathology in the University of Edinburgh, aged 81.—At Paris, Dr. Auguste Berard, Professor of Clinical Medicine at Paris; Charles Derosne, a member of the Royal Academy of Medicine, well known by his researches in organic chemistry.

Report of Deaths in Boston—for the week ending Dec. 26th, 49.—Males, 27—females, 22.—Stillborn, 6. Of consumption, 4—lung fever, 16—typhus fever, 3—disease of the bowels, 1—old age, 4—croup, 2—dropsy on the brain, 2—disease of the heart, 1—child-bed, 1—fistula, 1—paralysis, 2—debility, 1—intemperance, 2—burns, 1—disease of the stomach, 1—hooping cough, 2—cancer, 2—influenza, 1—jaundice. 1—inflammation of the bowels, 1.

Under 5 years, 13—between 5 and 20 years, 5—between 20 and 40 years, 12—between 40 and 60 years, 6—over 60 years, 13.

Insensibility during Surgical Operations.—It will be impossible, and it would not be advisable if it were possible, to furnish the readers of the Journal with all that may be said among the profession respecting the patented process of inhalation. Some of the remarks by the conductors of our Medical Journals are all that we can find room for, and these we shall endeavor to present fairly, though briefly. The following is quoted from a long article on the subject in the New York "Annalist," edited by Wm. C. Roberts, M. D.

"Into the effects produced by the inhalation of the compound, and its possible dangers, we shall not enter, referring the reader to the original, from which he will gather them much more fully than our space will suffer us to detail them. * * * * *

"But, even admitting, in the fullest manner, its safety and its efficacy—acknowledging that the possession of some such agent in removing the agony of surgical operations, has been a desideratum since the earliest dawn of our art, and assuming that it is now happily supplied, let us consider its use, under present circumstances, in the hands of medical men, in an ethical point of view.

"We find, *imprimis*, that Doctors Jackson and Morton have invented a remedy, of which they conceal the nature from the public, for interested purposes, and which they secure by a patent. Now if this be not nostrum-mongering, if it be not quackery in the oldest and fullest acceptation of the term, we do not know its meaning; and unless the parties conceive, that by their being, the one a chemist and the other a dentist, they are absolved from the ordinary ethical observances of medical men, they have done what must draw upon them the disapproval of all their right-thinking brethren, and threatens to exclude them from the professional pale. They are now of the race of the Swaims, the Dalbys, the Godfreys, the Solomons, '*et id genus omne*,' and, instead of being, by a generous disclosure of their process, public benefactors, are——*what* we shall leave it to the profession to determine.

"Now, it has ever, so far as we know, been a standing rule of medical ethics, that to this class of persons, the patronage of the profession is not to be given; that they are not to be associated with; that the concealment of a remedy, calculated to be of general benefit, on selfish grounds, was the very height of professional delinquency, and renders the perpetrator of an act so unworthy, liable to all its pains and penalties, and to the reproof of all his high-minded brethren. But we find that Dr. Warren (the most eminent man in the city of his residence), and Dr. Bigelow, both surgeons to the Massachusetts General Hospital, not only use a secret patented nostrum in their practice, but give it the sanction of their approbation; and the latter is at pains to 'apologize for the arrangement which has been made with regard to the application of the new agent.' How unsatisfactory, nay, how reprehensible these apologies are, we shall not here stop to show; their fallacy is so evident as only to require them to be read. 'Many will assent with reluctance,' says Dr. Bigelow, 'to the propriety of restricting by letters patent, the use of an agent capable of mitigating human suffering.' We hope so. We hope that the name of these will be 'legion.' But it is not on these grounds that we have ventured to impugn the correctness of Dr. B.'s conduct: our business is with *him*, and to with them."